

**Fill in this information to identify the case:**Debtor name Signature Pack, LLCUnited States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIACase number (if known) 19-20916☐ Check if this is an amended filingOfficial Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 31, 2019**X /s/ Chuck McAtee**\_\_\_\_\_  
Signature of individual signing on behalf of debtor**Chuck McAtee**\_\_\_\_\_  
Printed name**Manager**\_\_\_\_\_  
Position or relationship to debtor

## Fill in this information to identify the case:

Debtor name Signature Pack, LLCUnited States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIACase number (if known) 19-20916☐ Check if this is an amended filing**Official Form 206Sum**  
**Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets**1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. <b>Real property:</b> Copy line 88 from <i>Schedule A/B</i> .....	\$	<b>0.00</b>
1b. <b>Total personal property:</b> Copy line 91A from <i>Schedule A/B</i> .....	\$	<b>1,478,089.45</b>
1c. <b>Total of all property:</b> Copy line 92 from <i>Schedule A/B</i> .....	\$	<b>1,478,089.45</b>

**Part 2: Summary of Liabilities**

2. <b>Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> .....	\$	<b>1,357,943.89</b>
3. <b>Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 206E/F)		
3a. <b>Total claim amounts of priority unsecured claims:</b> Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$	<b>0.00</b>
3b. <b>Total amount of claims of nonpriority amount of unsecured claims:</b> Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+\$	<b>4,047,068.50</b>
4. <b>Total liabilities</b> ..... Lines 2 + 3a + 3b	\$	<b>5,405,012.39</b>

**Fill in this information to identify the case:**Debtor name Signature Pack, LLCUnited States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIACase number (if known) 19-20916☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Renasant BankChecking Account9594\$0.003.2. Renasant BankChecking Account5952\$62,567.643.3. Renasant BankChecking Account1314\$0.00**4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$62,567.64****Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.  
☒ Yes Fill in the information below.

**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. Paycom Security Deposit\$2,352.62

Debtor Signature Pack, LLC Case number (If known) 19-20916  
Name

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**  
Description, including name of holder of prepayment

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

**\$2,352.62**

**Part 3: Accounts receivable**

10. **Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.  
☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: 550,942.24 - 27,120.81 = .... \$523,821.43  
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

**\$523,821.43**

**Part 4: Investments**

13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.  
☐ Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets**

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.  
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	<b>Raw materials Inventory - Raw Materials and Finished Goods</b>	<u>4/30/2019</u>	<u>\$0.00</u>	<u>Cost</u>	<u>\$538,694.05</u>

20. **Work in progress**

21. **Finished goods, including goods held for resale**

22. **Other inventory or supplies**

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

**\$538,694.05**

24. **Is any of the property listed in Part 5 perishable?**

- ☐ No  
☒ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

Debtor Signature Pack, LLC Case number (If known) 19-20916  
Name

☐ No  
☒ Yes. Book value 0.00 Valuation method Cost Current Value 217,017.50

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

☒ No  
☐ Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

☒ No. Go to Part 7.  
☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☐ No. Go to Part 8.  
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Jenna's Desk	\$0.00		\$50.00
	Plant Office	\$0.00		\$50.00
	Conference Chairs	\$0.00		\$50.00
	Office Furniture - new office	\$0.00		\$50.00
	Office Furniture - Angie Powell	\$0.00		\$50.00
	Plant Offices	\$4,841.39		\$4,841.39
	Plant Office Furniture	\$0.00		\$50.00
	Office Cubicles	\$4,320.50		\$4,320.50
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software Portable Offices (2)	\$0.00		\$100.00
	Furniture (from TRC)	\$0.00		\$50.00
	Phone System (TRC)	\$0.00		\$50.00
	Quickbooks ES	\$0.00		\$50.00

Debtor Signature Pack, LLC Case number (If known) 19-20916  
Name

<u>Fire Alarm System - 5786 Hwy 129</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>Server - Office</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>Turner PC</u>	<u>\$0.00</u>	<u>\$100.00</u>
<u>Mike PC</u>	<u>\$0.00</u>	<u>\$100.00</u>
<u>Jenna PC</u>	<u>\$0.00</u>	<u>\$100.00</u>
<u>2 Laptops for QC, Monitor &amp; Hard Drives</u>	<u>\$0.00</u>	<u>\$200.00</u>
<u>Gigabit Switch</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>Monitor and Memory for Jenna</u>	<u>\$8.64</u>	<u>\$8.64</u>
<u>Monitor for Travis</u>	<u>\$8.11</u>	<u>\$8.11</u>
<u>Computer for Jennifer</u>	<u>\$57.33</u>	<u>\$57.33</u>
<u>Commission Calc Software</u>	<u>\$1,027.78</u>	<u>\$1,027.78</u>
<u>2TB External Hard Drive</u>	<u>\$13.75</u>	<u>\$13.75</u>
<u>Microsoft Office for Brian Toothill</u>	<u>\$29.86</u>	<u>\$29.86</u>
<u>Battery Backup - Lee</u>	<u>\$30.31</u>	<u>\$30.31</u>
<u>Battery Backup - Carlos</u>	<u>\$30.31</u>	<u>\$30.31</u>
<u>Jerry Monitor</u>	<u>\$58.97</u>	<u>\$58.97</u>
<u>Laptop for Angie Anderson x2</u>	<u>\$391.61</u>	<u>\$391.61</u>
<u>Laptop</u>	<u>\$255.40</u>	<u>\$255.40</u>
<u>Microsoft Office 2016 x5</u>	<u>\$379.15</u>	<u>\$379.15</u>
<u>Desktop System for Supervisor Office and Jerry at Plant</u>	<u>\$387.36</u>	<u>\$387.36</u>
<u>Image Printers</u>	<u>\$4,000.00</u>	<u>\$4,000.00</u>

Debtor Signature Pack, LLC  
NameCase number (If known) 19-20916

<u>Tape Machine</u>	<u>\$66.67</u>	<u>\$66.67</u>
<u>Walkie Talkies</u>	<u>\$642.00</u>	<u>\$642.00</u>
<u>PC for Krista</u>	<u>\$472.06</u>	<u>\$472.06</u>
<u>Videojet Dataflex Printer</u>	<u>\$11,361.52</u>	<u>\$11,361.52</u>
<u>HP Laserjet Pro M521dn Jerry on Dock</u>	<u>\$882.74</u>	<u>\$882.74</u>

42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$30,465.46

- 44.
- Is a depreciation schedule available for any of the property listed in Part 7?**

☒ No  
☐ Yes

- 45.
- Has any of the property listed in Part 7 been appraised by a professional within the last year?**

☒ No  
☐ Yes

**Part 8: Machinery, equipment, and vehicles**

- 46.
- Does the debtor own or lease any machinery, equipment, or vehicles?**

☐ No. Go to Part 9.  
☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)		Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. <b>Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles</b>				
47.1. <u>2009 Freight Liner</u>	<u>\$6,219.58</u>			<u>\$6,219.58</u>
47.2. <u>1993 Freight Liner</u>	<u>\$0.00</u>			<u>\$2,000.00</u>
48. <b>Watercraft, trailers, motors, and related accessories</b> <i>Examples:</i> Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels				
49. <b>Aircraft and accessories</b>				
50. <b>Other machinery, fixtures, and equipment (excluding farm machinery and equipment)</b>				
<u>Leasehold Improvements</u>	<u>\$0.00</u>			<u>\$1.00</u>
<u>Conveyor</u>	<u>\$0.00</u>			<u>\$50.00</u>

Debtor Signature Pack, LLC Case number (If known) 19-20916

Name

<u>Hand Scales</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>Hand Wash Sink</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>Installation of Conveyor Line 1</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>Stainless Steel Tables</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>Fire Conveyor #1</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>Fire Conveyor #2</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>20lb Scales (4)</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>Door Foamer #3</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>20lb Scales (4)</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>Multivac Vacuum Sealer</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>Brandrite #2 Sealer</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>Conveyor #2</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>Stainless Steel Tables (6)</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>Starflex VFFS (packaging system)</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>VFFS Gusset Attach</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>VFFS Access</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>73 D Racks</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>Compressor</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>Used Conveyors</u>	<u>\$0.00</u>	<u>\$50.00</u>
<u>Rocks - Room 3</u>	<u>\$106.48</u>	<u>\$106.48</u>
<u>Used Warehouse Racking</u>	<u>\$0.00</u>	<u>\$100.00</u>

Debtor	<u>Signature Pack, LLC</u>	Case number (If known)	<u>19-20916</u>
	Name		
<u>Room 3 Improvements</u>	<u>\$21,034.03</u>		<u>\$21,034.03</u>
<u>Vestibule - Room 1</u>	<u>\$2,502.46</u>		<u>\$2,502.46</u>
<u>Used Warehouse Racking -2</u>	<u>\$0.00</u>		<u>\$100.00</u>
<u>Used Warehouse Racking - 3</u>	<u>\$0.00</u>		<u>\$100.00</u>
<u>Parts Storage Room</u>	<u>\$0.00</u>		<u>\$50.00</u>
<u>Dry Warehouse Racking</u>	<u>\$0.00</u>		<u>\$100.00</u>
<u>Room 4 - Slider Production</u>	<u>\$0.00</u>		<u>\$50.00</u>
<u>Case Sealer</u>	<u>\$0.00</u>		<u>\$50.00</u>
<u>Slider Room Additions</u>	<u>\$1,043.75</u>		<u>\$1,043.75</u>
<u>Metal Detector</u>	<u>\$0.00</u>		<u>\$50.00</u>
<u>Sewage Grinder Pit Pump</u>	<u>\$21.20</u>		<u>\$21.20</u>
<u>Cartoner Conversion</u>	<u>\$90.77</u>		<u>\$90.77</u>
<u>Used PFM Flow Wrapper</u>	<u>\$983.33</u>		<u>\$983.33</u>
<u>Fan Motors - Atlas Blast</u>	<u>\$889.92</u>		<u>\$889.92</u>
<u>Slider Room Relo</u>	<u>\$1,294.50</u>		<u>\$1,294.50</u>
<u>Tunnel Walkway</u>	<u>\$523.47</u>		<u>\$523.47</u>
<u>Slider Feed Table #2</u>	<u>\$883.33</u>		<u>\$883.33</u>
<u>Used Flowwrapper #3</u>	<u>\$1,000.00</u>		<u>\$1,000.00</u>
<u>Slot Drains - rm 2</u>	<u>\$2,496.67</u>		<u>\$2,496.67</u>
<u>Leased Cartoner #2</u>	<u>\$23,333.33</u>		<u>\$23,333.33</u>
<u>Sonicwall Firewall</u>	<u>\$0.00</u>		<u>\$50.00</u>

Debtor	<b>Signature Pack, LLC</b> Name	Case number (If known)	<b>19-20916</b>
	<b>Room 2 Drain Basin</b>	<b>\$1,543.75</b>	<b>\$1,543.75</b>
	<b>Hydraulic Tote Dumper</b>	<b>\$341.60</b>	<b>\$341.60</b>
	<b>Stainless Steel Infeed Hopper</b>	<b>\$265.60</b>	<b>\$265.60</b>
	<b>SS Vibratory Pan</b>	<b>\$148.04</b>	<b>\$148.04</b>
	<b>2011 Fortress Phantom Metal Detector</b>	<b>\$3,133.42</b>	<b>\$3,133.42</b>
	<b>2011 Fortress Phantom Metal Detector</b>	<b>\$3,133.42</b>	<b>\$3,133.42</b>
	<b>2011 Fortress Phantom Metal Detector</b>	<b>\$3,133.42</b>	<b>\$3,133.42</b>
	<b>Fortress Phantom Metal Detector 8x4 Aperature</b>	<b>\$183.67</b>	<b>\$183.67</b>
	<b>Interpak USA2024sb Case Taper</b>	<b>\$1,312.58</b>	<b>\$1,312.58</b>
	<b>Toyota HPT25 Pallet Jack</b>	<b>\$50.67</b>	<b>\$50.67</b>
	<b>Pallet Jack</b>	<b>\$0.00</b>	<b>\$50.00</b>
	<b>Forklifts - Capital</b>	<b>\$9,211.47</b>	<b>\$9,211.47</b>
	<b>Used Scales from Fresh Frozen</b>	<b>\$236.11</b>	<b>\$236.11</b>
	<b>Exhaust Fans and Air Curtain</b>	<b>\$453.53</b>	<b>\$453.53</b>
	<b>Industrial Fans Direct - Air Curtain</b>	<b>\$729.37</b>	<b>\$729.37</b>
	<b>UltraCAT 210 Injector</b>	<b>\$85,659.41</b>	<b>\$85,659.41</b>
	<b>Marination Heat Exchanger</b>	<b>\$11,880.75</b>	<b>\$11,880.75</b>
	<b>Cat Duel Tank 200 Gallon Mixing Tank &amp; 300 Gallon Chilling System</b>	<b>\$35,879.40</b>	<b>\$35,879.40</b>
	<b>Drake Freon Unit</b>	<b>\$36,890.00</b>	<b>\$36,890.00</b>
	<b>Exhaust Fans for Marination Project</b>	<b>\$1,001.29</b>	<b>\$1,001.29</b>
	<b>Wall Panels for Marination Project</b>	<b>\$1,707.07</b>	<b>\$1,707.07</b>

Debtor Signature Pack, LLC  
NameCase number (If known) 19-20916

<u>Stand for Freon Unit</u>	<u>\$7,559.34</u>	<u>\$7,559.34</u>
<u>Piping for Marination Project</u>	<u>\$7,451.60</u>	<u>\$7,451.60</u>
<u>Mezzanine for Mixing Tanks</u>	<u>\$13,578.24</u>	<u>\$13,578.24</u>
<u>Electrical for Marination Project</u>	<u>\$7,911.20</u>	<u>\$7,911.20</u>
<u>Pallet Truck Scale</u>	<u>\$453.97</u>	<u>\$453.97</u>
<u>Air Saver</u>	<u>\$28.44</u>	<u>\$28.44</u>
<u>Load Cells</u>	<u>\$928.94</u>	<u>\$928.94</u>
<u>Sanitary pip to go from marination to ice glazer tank</u>	<u>\$434.32</u>	<u>\$434.32</u>
<u>2 Yamato 0/16L-S W/A Reconditioned Serial #'s AFK807530</u>	<u>\$2,021.54</u>	<u>\$2,021.54</u>
<u>Rolling Ladder</u>	<u>\$563.57</u>	<u>\$563.57</u>
<u>10/16L-S W/A Reconditioned Serial# A8040599 A8970014</u>	<u>\$2,628.06</u>	<u>\$2,628.06</u>
<u>Panels, extruded aluminum angle for Room 3 Air unit shielding</u>	<u>\$955.83</u>	<u>\$955.83</u>
<u>Baldor Motor</u>	<u>\$1,122.40</u>	<u>\$1,122.40</u>
<u>Mezzanine Flooring</u>	<u>\$4,347.37</u>	<u>\$4,347.37</u>
<u>Motor for Spiral Freezer</u>	<u>\$916.28</u>	<u>\$916.28</u>
<u>Installed Copper Water Line from 2" Water Main Outside</u>	<u>\$2,745.58</u>	<u>\$2,745.58</u>
<u>Pallet truck &amp; scale</u>	<u>\$1,377.26</u>	<u>\$1,377.26</u>
<u>Vacuum pump</u>	<u>\$2,145.92</u>	<u>\$2,145.92</u>

51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

**\$320,188.25**

Debtor Signature Pack, LLC Case number (If known) 19-20916  
Name

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☒ No  
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 9: Real property**

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.  
☐ Yes Fill in the information below.

**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

- ☒ No. Go to Part 11.  
☐ Yes Fill in the information below.

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.  
☐ Yes Fill in the information below.

Debtor **Signature Pack, LLC**  
NameCase number (If known) **19-20916****Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<b>\$62,567.64</b>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<b>\$2,352.62</b>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<b>\$523,821.43</b>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<b>\$0.00</b>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<b>\$538,694.05</b>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<b>\$0.00</b>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<b>\$30,465.46</b>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<b>\$320,188.25</b>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<b>\$0.00</b>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<b>\$0.00</b>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	<b>\$0.00</b>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<b>\$1,478,089.45</b>	<b>\$0.00</b>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<b>\$1,478,089.45</b>

## Fill in this information to identify the case:

Debtor name **Signature Pack, LLC**United States Bankruptcy Court for the: **NORTHERN DISTRICT OF GEORGIA**Case number (if known) **19-20916**☐ Check if this is an amended filing

## Official Form 206D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

## 1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

## Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	<b>Renasant Bank</b> Creditor's Name <b>Mitchell Waycaster, CEO</b> <b>209 Troy Street</b> <b>Tupelo, MS 38801</b> Creditor's mailing address  Creditor's email address, if known  <b>Date debt was incurred</b>  <b>Last 4 digits of account number</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>Revolver loan (\$747,801.80), term loan (\$451,329.13), and equipment loan (\$158,812.96)</b>  Describe the lien  Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,357,943.89</b>	<b>Unknown</b>

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$1,357,943.89**

## Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
<b>Lee Hart</b> <b>Nelson Mullins Riley &amp; Scarborough</b> <b>201 17th Street, NW Ste 1700</b> <b>Atlanta, GA 30363</b>	Line <b>2.1</b>	

## Fill in this information to identify the case:

Debtor name **Signature Pack, LLC**United States Bankruptcy Court for the: **NORTHERN DISTRICT OF GEORGIA**Case number (if known) **19-20916**☐ Check if this is an amended filing

## Official Form 206E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

## 1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

## 2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount	
2.1	Priority creditor's name and mailing address <b>Byung J Pak, US Attorney</b> <b>600 Richard B. Russell Buildin</b> <b>75 Ted Turner Drive, SW</b> <b>Atlanta, GA 30303</b>  Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>Notice Only</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>	<b>\$0.00</b>
2.2	Priority creditor's name and mailing address <b>Department of Justice, Tax Div</b> <b>Civil Trial Section, Southern</b> <b>P.O. Box 14198, Ben Franklin</b> <b>Washington, DC 20044</b>  Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>For Notice Only</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>	<b>\$0.00</b>

Debtor	<b>Signature Pack, LLC</b> Name	Case number (if known)	<b>19-20916</b>
--------	------------------------------------	------------------------	-----------------

  

2.3	Priority creditor's name and mailing address <b>Georgia Department of Labor Mark Butler, Commissioner 148 Andew Young Int. Ste 900 Atlanta, GA 30303</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b>	<b>\$0.00</b>
	Date or dates debt was incurred	Basis for the claim: <b>Notice Only</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.4	Priority creditor's name and mailing address <b>Georgia Department of Revenue Compliance Division 1800 Century Blvd, Ste 16102 Atlanta, GA 30345-3205</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b>	<b>\$0.00</b>
	Date or dates debt was incurred	Basis for the claim: <b>Notice Only</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.5	Priority creditor's name and mailing address <b>Internal Revenue Service Central Insolvency Office 401 W. Peachtree St., NW Atlanta, GA 30308</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b>	<b>\$0.00</b>
	Date or dates debt was incurred	Basis for the claim: <b>Notice Only</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.6	Priority creditor's name and mailing address <b>Jackson Co. Tax Assessor 67 Athens Street Jefferson, GA 30549</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b>	<b>\$0.00</b>
	Date or dates debt was incurred	Basis for the claim: <b>For Notice Only</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Signature Pack, LLC	Case number (if known)	19-20916
Name			
2.7	Priority creditor's name and mailing address <b>Lynne Riley</b> <b>State of Georgia Revenue Commi</b> <b>1800 Century Blvd, N.E.</b> <b>Atlanta, GA 30345</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b> <b>\$0.00</b>
Date or dates debt was incurred		Basis for the claim: <b>Notice Only</b>	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.8	Priority creditor's name and mailing address <b>Office Of the Chief Co. IRS</b> <b>1111 Constitution Ave</b> <b>Washington, DC 20224</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b> <b>\$0.00</b>
Date or dates debt was incurred		Basis for the claim: <b>Notice Only</b>	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.9	Priority creditor's name and mailing address <b>Ohio Department of Taxation</b> <b>4485 Northland Ridge Blvd</b> <b>Columbus, OH 43229</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b> <b>\$0.00</b>
Date or dates debt was incurred		Basis for the claim: <b>Notice Only</b>	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.10	Priority creditor's name and mailing address <b>Secretary of the Treasury</b> <b>15th &amp; Pennsylvania Ave, NW</b> <b>Washington, DC 20200</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b> <b>\$0.00</b>
Date or dates debt was incurred		Basis for the claim: <b>Notice Only</b>	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Signature Pack, LLC</b> Name	Case number (if known)	<b>19-20916</b>
--------	------------------------------------	------------------------	-----------------

---

2.11	Priority creditor's name and mailing address <b>U.S. Attorney General U.S. Department of Justice 950 Pennsylvania Ave NW Washington, DC 20350</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b>	<b>\$0.00</b>
------	--	--	---------------	---------------

---

Date or dates debt was incurred	Basis for the claim: <b>Notice Only</b>
---------------------------------	--

---

Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
---------------------------------	---

---

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
--	--	--	-----------------

---

3.1	Nonpriority creditor's name and mailing address <b>1st Mechanical Services, Inc. 303 Curie Drive Alpharetta, GA 30005</b> Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,588.74</b>
-----	--	---	-------------------

---

3.2	Nonpriority creditor's name and mailing address <b>3M PO Box 844127 Dallas, TX 75284</b> Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$903.42</b>
-----	---	---	-----------------

---

3.3	Nonpriority creditor's name and mailing address <b>A J Letizio Fifty-five Enterprise Dr Windham, NH 03087</b> Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>For notice only</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
-----	--	---	---------------

---

3.4	Nonpriority creditor's name and mailing address <b>AAA Scales &amp; Systems 3212 Harmony Church Road Gainesville, GA 30507</b> Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,433.61</b>
-----	---	---	-------------------

---

3.5	Nonpriority creditor's name and mailing address <b>ACOSTA PO Box 281996 Atlanta, GA 30384</b> Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,952.56</b>
-----	--	---	-------------------

---

Debtor	Signature Pack, LLC	Case number (if known)	19-20916
Name			
3.6	<b>Nonpriority creditor's name and mailing address</b> <b>Advanced Marketing Concepts</b> <b>2717 W. Southern Ave Ste. 1</b> <b>Tempe, AZ 85282</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$679.46</b>
3.7	<b>Nonpriority creditor's name and mailing address</b> <b>AIRGAS SAFETY</b> <b>PO BOX 532609</b> <b>Atlanta, GA 30353</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,251.69</b>
3.8	<b>Nonpriority creditor's name and mailing address</b> <b>Ambassador Sanitation Mngmnt</b> <b>PO Box 2057</b> <b>Thomasville, GA 31799</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$90,989.27</b>
3.9	<b>Nonpriority creditor's name and mailing address</b> <b>Amer. Express Corporate Card</b> <b>PO Box 1270</b> <b>Newark, NJ 07101</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$363,748.51</b>
3.10	<b>Nonpriority creditor's name and mailing address</b> <b>Americold</b> <b>25586 Network Place</b> <b>Chicago, IL 60673</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$373,906.47</b>
3.11	<b>Nonpriority creditor's name and mailing address</b> <b>AMSPAK</b> <b>P.O. Box 2225</b> <b>Hartsville, SC 29551</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,381.25</b>
3.12	<b>Nonpriority creditor's name and mailing address</b> <b>Aramark</b> <b>P.O Box 731676</b> <b>Dallas, TX 75373</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$13,735.71</b>

Debtor	<b>Signature Pack, LLC</b> <small>Name</small>	Case number (if known)	<b>19-20916</b>
--------	---	------------------------	-----------------

  

3.13	<b>Nonpriority creditor's name and mailing address</b> <b>Arrow Lines Services Inc.</b> <b>PO Box 1298</b> <b>Gainesville, GA 30503</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,458.00</b>
3.14	<b>Nonpriority creditor's name and mailing address</b> <b>Associated Brokers, Inc.</b> <b>4777 Aviation Parkway Suite K</b> <b>Atlanta, GA 30349</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$240.00</b>
3.15	<b>Nonpriority creditor's name and mailing address</b> <b>Athens Material Handling</b> <b>316 Commerce Blvd</b> <b>PO Box 6685</b> <b>Athens, GA 30604</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9.81</b>
3.16	<b>Nonpriority creditor's name and mailing address</b> <b>Atlantic Pit Service, Inc.</b> <b>P.O Box 837</b> <b>Lawrenceville, GA 30046</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$378.00</b>
3.17	<b>Nonpriority creditor's name and mailing address</b> <b>Automatic Protection Services</b> <b>4655 Canton Rd</b> <b>Marietta, GA 30066</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$240.00</b>
3.18	<b>Nonpriority creditor's name and mailing address</b> <b>Baker Donelson</b> <b>3414 Peachtree Road NE</b> <b>Suite 1600</b> <b>Atlanta, GA 30326</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$153.00</b>
3.19	<b>Nonpriority creditor's name and mailing address</b> <b>Bankcard Center</b> <b>P.O. Box 71205</b> <b>Charlotte, NC 28272</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$17,080.34</b>

Debtor	Signature Pack, LLC	Case number (if known)	19-20916
3.20	<b>Nonpriority creditor's name and mailing address</b> <b>Bell, Davis, &amp; Pitt, P.A.</b> <b>PO Box 21029</b> <b>Winston Salem, NC 27120</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,018.75</b>
3.21	<b>Nonpriority creditor's name and mailing address</b> <b>Big Daddy Foods Inc</b> <b>PO Box 19974</b> <b>Houston, TX 77224</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$25,845.60</b>
3.22	<b>Nonpriority creditor's name and mailing address</b> <b>Campbell Sales &amp; Service, Inc</b> <b>P.O. Box 488</b> <b>Athens, GA 30603</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,022.70</b>
3.23	<b>Nonpriority creditor's name and mailing address</b> <b>Champion Foods, Inc</b> <b>9516 Waterford Rd</b> <b>Jacksonville, FL 32257</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$94,304.80</b>
3.24	<b>Nonpriority creditor's name and mailing address</b> <b>Chastains Janitorial Supply</b> <b>1630 MLK Jr. Blvd</b> <b>Gainesville, GA 30501</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$90.00</b>
3.25	<b>Nonpriority creditor's name and mailing address</b> <b>ChemStation of Alabama</b> <b>3021 Dublin Circle</b> <b>Bessemer, AL 35020</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,228.36</b>
3.26	<b>Nonpriority creditor's name and mailing address</b> <b>Christopher Carr</b> <b>Attorney General of Georgia</b> <b>40 Capitol Square SW</b> <b>Atlanta, GA 30334</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>For Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor	Signature Pack, LLC	Case number (if known)	19-20916
3.27	<b>Nonpriority creditor's name and mailing address</b> <b>Clay Daniel</b> <b>P.O Box 434</b> <b>Bogart, GA 30622</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$140.00</b>
3.28	<b>Nonpriority creditor's name and mailing address</b> <b>Combined Worksite Solutions</b> <b>5277 Paysphere Circle</b> <b>Chicago, IL 60674</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$531.64</b>
3.29	<b>Nonpriority creditor's name and mailing address</b> <b>Connect Logistics</b> <b>3292 Thompson Bridge RD #350</b> <b>Gainesville, GA 30506</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,377.00</b>
3.30	<b>Nonpriority creditor's name and mailing address</b> <b>Continental Carbonic Products</b> <b>DEPT 3833 PO Box 123833</b> <b>Dallas, TX 75312</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$507.57</b>
3.31	<b>Nonpriority creditor's name and mailing address</b> <b>Cooling &amp; Applied Tech, Inc</b> <b>P.O. BOX 772998</b> <b>Chicago, IL 60677</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$637.24</b>
3.32	<b>Nonpriority creditor's name and mailing address</b> <b>CROSSLEY McINTOSH HANLEY &amp; EDES</b> <b>5002 Randall Parkway</b> <b>Wilmington, NC 28403</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,995.48</b>
3.33	<b>Nonpriority creditor's name and mailing address</b> <b>Crown Lift Trucks</b> <b>PO Box 641173</b> <b>Cincinnati, OH 45264</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,207.64</b>

Debtor	Signature Pack, LLC	Case number (if known)	19-20916
3.34	<b>Nonpriority creditor's name and mailing address</b> <b>CSS Polymers Inc.</b> <b>3482 Keith Bridge Rd Suite 294</b> <b>Cumming, GA 30041</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$842.62</b>
3.35	<b>Nonpriority creditor's name and mailing address</b> <b>Dahlonaga Packaging, Inc.</b> <b>P.O. Box 936696</b> <b>Atlanta, GA 31193</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,674.55</b>
3.36	<b>Nonpriority creditor's name and mailing address</b> <b>Dollar General Market</b> <b>P.O. Box 1087</b> <b>Goodlettsville, TN 37072</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>For notice only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.37	<b>Nonpriority creditor's name and mailing address</b> <b>Dunlap Stainless</b> <b>2905 Ramsey Rd</b> <b>Gainesville, GA 30507</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$696.72</b>
3.38	<b>Nonpriority creditor's name and mailing address</b> <b>Eco-Lab</b> <b>24198 Network Place</b> <b>Chicago, IL 60673</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$88.22</b>
3.39	<b>Nonpriority creditor's name and mailing address</b> <b>Electronic Motors Co. Inc.</b> <b>7705 Hwy 29 South</b> <b>Hull, GA 30646</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$291.19</b>
3.40	<b>Nonpriority creditor's name and mailing address</b> <b>ETCON Employment Solutions</b> <b>439 E E Butler Parkway</b> <b>Gainesville, GA 30501</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$20,867.99</b>

Debtor	Signature Pack, LLC	Case number (if known)	19-20916
Name			
3.41	<b>Nonpriority creditor's name and mailing address</b> <b>Family Dollar Services, LLC</b> <b>Lynda Leahy, Registered Agent</b> <b>2626 Glenwood Ave, Ste 550</b> <b>Wilmington, DE 19808</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$590,000.00</b>
3.42	<b>Nonpriority creditor's name and mailing address</b> <b>Farr Electric Inc.</b> <b>4673 East Hall Rd.</b> <b>Gainesville, GA 30507</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$645.00</b>
3.43	<b>Nonpriority creditor's name and mailing address</b> <b>Food &amp; Dairy Research Assoc.s</b> <b>PO Box 608</b> <b>Commerce, GA 30529</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,308.75</b>
3.44	<b>Nonpriority creditor's name and mailing address</b> <b>Forester Roller Company, Inc</b> <b>P O Box 2067</b> <b>Lawrenceville, GA 30046</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$250.00</b>
3.45	<b>Nonpriority creditor's name and mailing address</b> <b>Fortis Solutions Group, LLC</b> <b>5362 McEver Road</b> <b>Flowery Branch, GA 30542</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15,501.60</b>
3.46	<b>Nonpriority creditor's name and mailing address</b> <b>Genesis Baking Company</b> <b>211 Woodlawn Avenue</b> <b>Norwalk, OH 44857</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$43,599.36</b>
3.47	<b>Nonpriority creditor's name and mailing address</b> <b>GIX Logistics, Inc.</b> <b>P.O. Box 1845</b> <b>Grand Island, NE 68802</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$692.24</b>

Debtor	Signature Pack, LLC	Case number (if known)	19-20916
3.48	<b>Nonpriority creditor's name and mailing address</b> <b>Glacier Sales, Inc</b> <b>P.O. Box 2646</b> <b>Yakima, WA 98907</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$19,882.50</b>
3.49	<b>Nonpriority creditor's name and mailing address</b> <b>Global Coordination</b> <b>2625 N Cage Blvd</b> <b>Pharr, TX 78577</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>For notice only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.50	<b>Nonpriority creditor's name and mailing address</b> <b>Gold Standard Baking</b> <b>3700 S. Kedzie Ave.</b> <b>Chicago, IL 60632</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,944.00</b>
3.51	<b>Nonpriority creditor's name and mailing address</b> <b>Goodsource</b> <b>3115 Melrose Dr. Suite 160</b> <b>Carlsbad, CA 92010</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$17,252.00</b>
3.52	<b>Nonpriority creditor's name and mailing address</b> <b>Gourmet Culinary Solutions LLC</b> <b>515 Commercial Drive</b> <b>Statham, GA 30666</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$171,215.91</b>
3.53	<b>Nonpriority creditor's name and mailing address</b> <b>Graphic Packaging</b> <b>PO Box 404170</b> <b>Atlanta, GA 30384</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$715.00</b>
3.54	<b>Nonpriority creditor's name and mailing address</b> <b>Green Guard First Aid &amp; Safety</b> <b>3499 Rider Trail South</b> <b>Earth City, MO 63045</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$309.95</b>

Debtor	<b>Signature Pack, LLC</b> <small>Name</small>	Case number (if known)	<b>19-20916</b>
--------	---	------------------------	-----------------

  

3.55	<b>Nonpriority creditor's name and mailing address</b> <b>H &amp; D Pallet</b> <b>464 Garrison Shoals Rd</b> <b>Lula, GA 30554</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$13,475.00</b>
3.56	<b>Nonpriority creditor's name and mailing address</b> <b>Heat and Control, Inc</b> <b>21121 Cabot Blvd Hayward</b> <b>Hayward, CA 94545</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$135.83</b>
3.57	<b>Nonpriority creditor's name and mailing address</b> <b>Hollis Transport</b> <b>4515 Cantrell Rd.</b> <b>Flowery Branch, GA 30542</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$700.00</b>
3.58	<b>Nonpriority creditor's name and mailing address</b> <b>Horizon Packaging</b> <b>6248 Ringgold Road</b> <b>Chattanooga, TN 37412</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$21,874.65</b>
3.59	<b>Nonpriority creditor's name and mailing address</b> <b>HUMANA HEALTH PLAN INC.</b> <b>P O BOX 3225</b> <b>Milwaukee, WI 53201</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$25,143.77</b>
3.60	<b>Nonpriority creditor's name and mailing address</b> <b>Hygiena</b> <b>Attn: Accounts Receivable</b> <b>File 2007 1801 W Olympic Blvd</b> <b>Pasadena, CA 91199</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,441.98</b>
3.61	<b>Nonpriority creditor's name and mailing address</b> <b>Infusion Sales Group</b> <b>2928 Walden Avenue</b> <b>Depew, NY 14043</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$267.73</b>

Debtor	Signature Pack, LLC	Case number (if known)	19-20916
Name			
3.62	<b>Nonpriority creditor's name and mailing address</b> <b>John R White Company, Inc.</b> <b>200 Citation Court Suite 100</b> <b>Birmingham, AL 35209</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$34,459.43</b>
3.63	<b>Nonpriority creditor's name and mailing address</b> <b>Johnson O'Hare Company, Inc.</b> <b>One Progress Road</b> <b>Billerica, MA 01821</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,856.00</b>
3.64	<b>Nonpriority creditor's name and mailing address</b> <b>JSO Associates Inc.</b> <b>17 Maple Drive</b> <b>Great Neck, NY 11021</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$44,065.25</b>
3.65	<b>Nonpriority creditor's name and mailing address</b> <b>Kudzu Valley Farm</b> <b>PO Box 922</b> <b>Oakwood, GA 30566</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$380,384.80</b>
3.66	<b>Nonpriority creditor's name and mailing address</b> <b>Lake Foods, LLC</b> <b>355 Industrial Park Rd</b> <b>Hartwell, GA 30643</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$12,876.60</b>
3.67	<b>Nonpriority creditor's name and mailing address</b> <b>Linde LLC</b> <b>88718 Expedite Way</b> <b>Chicago, IL 60695</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$83,683.73</b>
3.68	<b>Nonpriority creditor's name and mailing address</b> <b>LogoSurfing Promtnal Products</b> <b>2518 Oak Valley Lane</b> <b>Dacula, GA 30019</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$139.00</b>

Debtor <b>Signature Pack, LLC</b>		Case number (if known) <b>19-20916</b>
Name		

---

3.69	<b>Nonpriority creditor's name and mailing address</b> <b>M&amp;J Foods</b> <b>1670 Calming Water Drive</b> <b>Fleming Island, FL 32003</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$88,423.00</b>
------	--	---	--------------------

---

3.70	<b>Nonpriority creditor's name and mailing address</b> <b>Machinery Support</b> <b>PO Box 28</b> <b>Moore, SC 29369</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,186.96</b>
------	--	---	-------------------

---

3.71	<b>Nonpriority creditor's name and mailing address</b> <b>Mallard Marketing</b> <b>4027 Clearwell</b> <b>Amarillo, TX 79109</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,438.47</b>
------	--	---	-------------------

---

3.72	<b>Nonpriority creditor's name and mailing address</b> <b>Manning Brothers</b> <b>P.O Box 162138</b> <b>Atlanta, GA 30321</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$344.64</b>
------	--	---	-----------------

---

3.73	<b>Nonpriority creditor's name and mailing address</b> <b>McMaster-Carr</b> <b>PO Box 7690</b> <b>Chicago, IL 60680</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,331.76</b>
------	--	---	-------------------

---

3.74	<b>Nonpriority creditor's name and mailing address</b> <b>Messer LLC</b> <b>88718 Expedite Way</b> <b>Chicago, IL 60695</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$53,739.39</b>
------	--	---	--------------------

---

3.75	<b>Nonpriority creditor's name and mailing address</b> <b>Monogram Food Solutions, LLS</b> <b>P.O. Box 71400</b> <b>Chicago, IL 60694</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$147,996.97</b>
------	--	---	---------------------

---

Debtor	<b>Signature Pack, LLC</b> <small>Name</small>	Case number (if known)	<b>19-20916</b>
--------	---	------------------------	-----------------

---

3.76	<b>Nonpriority creditor's name and mailing address</b> <b>Murray Brokerage</b> <b>684 Woodlands Drive Suite 300</b> <b>Maumee, OH 43537</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$57.68</b>
------	--	---	----------------

---

3.77	<b>Nonpriority creditor's name and mailing address</b> <b>Nordson</b> <b>PO Box 802586</b> <b>Chicago, IL 60680</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$970.01</b>
------	--	---	-----------------

---

3.78	<b>Nonpriority creditor's name and mailing address</b> <b>North Georgia Logistics</b> <b>P O Box 208</b> <b>Pendergrass, GA 30567</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$11,820.30</b>
------	--	---	--------------------

---

3.79	<b>Nonpriority creditor's name and mailing address</b> <b>North Georgia Propane, Inc.</b> <b>PO Box 1518</b> <b>Gainesville, GA 30503</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,316.29</b>
------	--	---	-------------------

---

3.80	<b>Nonpriority creditor's name and mailing address</b> <b>Northeast Food Marketing</b> <b>30 Myano Lane Suite 30</b> <b>Stamford, CT 06902</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,709.80</b>
------	---	---	-------------------

---

3.81	<b>Nonpriority creditor's name and mailing address</b> <b>Northern Safety &amp; Industrial</b> <b>PO Box 4250</b> <b>Utica, NY 13504</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,708.59</b>
------	---	---	-------------------

---

3.82	<b>Nonpriority creditor's name and mailing address</b> <b>NW French and Associates</b> <b>1502 1st Avenue North</b> <b>Fargo, ND 58102</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$12,791.46</b>
------	---	---	--------------------

Debtor	<b>Signature Pack, LLC</b> Name	Case number (if known)	<b>19-20916</b>
--------	------------------------------------	------------------------	-----------------

---

3.83	<b>Nonpriority creditor's name and mailing address</b> <b>Pack Rite Div Mettler-Toledo</b> <b>PO Box 730867</b> <b>Dallas, TX 75373</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,925.87</b>
------	--	---	-------------------

---

3.84	<b>Nonpriority creditor's name and mailing address</b> <b>Pacmac, Inc</b> <b>P.O. Box 360</b> <b>Fayetteville, AR 72702</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,350.54</b>
------	--	---	--------------------

---

3.85	<b>Nonpriority creditor's name and mailing address</b> <b>Paragon Food Group, LLC</b> <b>Carl Perry</b> <b>345 Rae's Creek Drive</b> <b>Greenville, SC 29609</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,182.39</b>
------	--	---	-------------------

---

3.86	<b>Nonpriority creditor's name and mailing address</b> <b>Peach State Fire, Inc.</b> <b>626 Industrial Blvd</b> <b>Gainesville, GA 30501</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$228.40</b>
------	---	---	-----------------

---

3.87	<b>Nonpriority creditor's name and mailing address</b> <b>Penobscot McCrum LLC</b> <b>PO Drawer 229</b> <b>Belfast, ME 04915</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$167,569.00</b>
------	---	---	---------------------

---

3.88	<b>Nonpriority creditor's name and mailing address</b> <b>Perimeter Marketing Inc.</b> <b>P O Box 1167</b> <b>Waxhaw, NC 28176</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$22,111.97</b>
------	---	---	--------------------

---

3.89	<b>Nonpriority creditor's name and mailing address</b> <b>Piedmont National Corp</b> <b>PO Box 890938</b> <b>Charlotte, NC 28289</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$673.42</b>
------	---	---	-----------------

Debtor	<b>Signature Pack, LLC</b> <small>Name</small>	Case number (if known)	<b>19-20916</b>
--------	---	------------------------	-----------------

  

3.90	<b>Nonpriority creditor's name and mailing address</b> <b>Pilgrim's Pride Corporation</b> <b>P.O. Box 809225</b> <b>Chicago, IL 60680</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$122,520.00</b>
3.91	<b>Nonpriority creditor's name and mailing address</b> <b>Pioneer Meat Brokerage, Inc.</b> <b>P O BOX 8047</b> <b>Edmond, OK 73083</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,435.07</b>
3.92	<b>Nonpriority creditor's name and mailing address</b> <b>Planned Administrators</b> <b>P.O Box 6927</b> <b>Columbia, SC 29260</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,751.18</b>
3.93	<b>Nonpriority creditor's name and mailing address</b> <b>Pratt Recycling</b> <b>PO Box 933949</b> <b>Atlanta, GA 31193</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$85.00</b>
3.94	<b>Nonpriority creditor's name and mailing address</b> <b>Ralf Jeffy Green</b> <b>2295 Skylark Drive</b> <b>Alexander City, AL 35010</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,736.10</b>
3.95	<b>Nonpriority creditor's name and mailing address</b> <b>RAM Inc</b> <b>2090 Columbiana Road</b> <b>Suite 2600</b> <b>Birmingham, AL 35216</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$284.52</b>
3.96	<b>Nonpriority creditor's name and mailing address</b> <b>Randstad North America, Inc.</b> <b>PO Box 742689</b> <b>Atlanta, GA 30374</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$50.00</b>

Debtor	<b>Signature Pack, LLC</b> <small>Name</small>	Case number (if known)	<b>19-20916</b>
--------	---	------------------------	-----------------

  

3.97	<b>Nonpriority creditor's name and mailing address</b> <b>Reese Group</b> <b>PO Box 40423</b> <b>Nashville, TN 37204</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,961.38</b>
3.98	<b>Nonpriority creditor's name and mailing address</b> <b>Reliable Transport. Solutions</b> <b>PO Box 507</b> <b>Amelia, OH 45102</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$33,637.00</b>
3.99	<b>Nonpriority creditor's name and mailing address</b> <b>RG Marketing &amp; Consulting</b> <b>1716 S San Marcos St. 107</b> <b>San Antonio, TX 78207</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$105.44</b>
3.100	<b>Nonpriority creditor's name and mailing address</b> <b>RJS Sales &amp; Marketing</b> <b>PO BOX 62048</b> <b>Cincinnati, OH 45262</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,786.16</b>
3.101	<b>Nonpriority creditor's name and mailing address</b> <b>Romer Labs</b> <b>Department RL</b> <b>P.O Box 66971</b> <b>Saint Louis, MO 63166</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,557.97</b>
3.102	<b>Nonpriority creditor's name and mailing address</b> <b>Rouses Market</b> <b>P O BOX 5358</b> <b>Thibodaux, LA 70302</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$409.68</b>
3.103	<b>Nonpriority creditor's name and mailing address</b> <b>S. E. Meats</b> <b>700 25th Ave. West</b> <b>Birmingham, AL 35204</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35,696.40</b>

Debtor	<b>Signature Pack, LLC</b> <small>Name</small>	Case number (if known)	<b>19-20916</b>
--------	---	------------------------	-----------------

  

3.104	<b>Nonpriority creditor's name and mailing address</b> <b>Scherzer and Associates</b> <b>8801 Ballentine Street #100</b> <b>Overland Park, KS 66214</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$369.00</b>
3.105	<b>Nonpriority creditor's name and mailing address</b> <b>Seabrook Brothers &amp; Sons</b> <b>P O Box 781405</b> <b>Philadelphia, PA 19178</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$130,395.68</b>
3.106	<b>Nonpriority creditor's name and mailing address</b> <b>Sherwood Food Distributors-ATL</b> <b>5400 Fulton Industrial Blvd</b> <b>Atlanta, GA 30336</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,959.00</b>
3.107	<b>Nonpriority creditor's name and mailing address</b> <b>Signature Food Marketing, LLC</b> <b>5786 Hwy 129 North</b> <b>Suite N</b> <b>Pendergrass, GA 30567</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.108	<b>Nonpriority creditor's name and mailing address</b> <b>Southeastern Paper Co.</b> <b>PO BOX 890671</b> <b>Charlotte, NC 28289</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$43,926.20</b>
3.109	<b>Nonpriority creditor's name and mailing address</b> <b>Southern Food Broker</b> <b>196 Bruce Etheredge Parkway</b> <b>Pell City, AL 35128</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$128,503.51</b>
3.110	<b>Nonpriority creditor's name and mailing address</b> <b>Stiles Heating and Cooling, Inc</b> <b>140 Ben Burton Road</b> <b>Bogart, GA 30622</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,029.50</b>

Debtor	<b>Signature Pack, LLC</b> <small>Name</small>	Case number (if known)	<b>19-20916</b>
--------	---	------------------------	-----------------

  

3.111	<b>Nonpriority creditor's name and mailing address</b> <b>Strategic Industries</b> <b>PO Box 2576</b> <b>Alpharetta, GA 30023</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,874.85</b>
3.112	<b>Nonpriority creditor's name and mailing address</b> <b>Summit Marketing Partners</b> <b>401 Hall Street SW Suite 289</b> <b>Grand Rapids, MI 49503</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,321.41</b>
3.113	<b>Nonpriority creditor's name and mailing address</b> <b>Sun Mark Foods Ltd.</b> <b>PO Box 1294</b> <b>Madison, NJ 07940</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,196.00</b>
3.114	<b>Nonpriority creditor's name and mailing address</b> <b>SupplyOne, Inc. Atlanta</b> <b>IPC Collection Account</b> <b>PO Box 740438</b> <b>Atlanta, GA 30374</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,255.20</b>
3.115	<b>Nonpriority creditor's name and mailing address</b> <b>Tasty Breads International</b> <b>9445 Fullerton Avenue</b> <b>Franklin Park, IL 60131</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,814.00</b>
3.116	<b>Nonpriority creditor's name and mailing address</b> <b>Tennessee Bun Co.</b> <b>2975 Armory Dr.</b> <b>Nashville, TN 37204</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$16,307.76</b>
3.117	<b>Nonpriority creditor's name and mailing address</b> <b>The Food Exchange</b> <b>5650 El Camino Real, Suite 220</b> <b>Carlsbad, CA 92008</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$27,891.60</b>

Debtor <b>Signature Pack, LLC</b>		Case number (if known) <b>19-20916</b>
Name		

---

3.118	<b>Nonpriority creditor's name and mailing address</b> <b>TNT</b> <b>701 Industrial Drive</b> <b>Perryville, MO 63775</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$60,389.81</b>
-------	--	--	--------------------

---

3.119	<b>Nonpriority creditor's name and mailing address</b> <b>Tom Southworth</b> <b>5876 Highway 129 North</b> <b>Suite N</b> <b>Pendergrass, GA 30567</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$60,282.55</b>
-------	--	--	--------------------

---

3.120	<b>Nonpriority creditor's name and mailing address</b> <b>Top Notch Personnel</b> <b>P.O. Box 464730</b> <b>Lawrenceville, GA 30042</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$30,916.18</b>
-------	--	--	--------------------

---

3.121	<b>Nonpriority creditor's name and mailing address</b> <b>Triangle Sales and Marketing</b> <b>120 Marguerite Drive Suite 200</b> <b>Cranberry Twp, PA 16066</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,316.85</b>
-------	--	--	-------------------

---

3.122	<b>Nonpriority creditor's name and mailing address</b> <b>ULINE</b> <b>Attn: Accounts Receivable</b> <b>PO BOX 88741</b> <b>Chicago, IL 60680</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,197.66</b>
-------	---	--	-------------------

---

3.123	<b>Nonpriority creditor's name and mailing address</b> <b>US Waste &amp; Recycling, Inc.</b> <b>P.O. Box 420825</b> <b>Atlanta, GA 30342</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$400.00</b>
-------	---	--	-----------------

---

3.124	<b>Nonpriority creditor's name and mailing address</b> <b>USA Logistics, Inc</b> <b>P.O. Box 2977</b> <b>Chesterton, IN 46304</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,763.00</b>
-------	--	--	-------------------

---

Debtor Name	Signature Pack, LLC	Case number (if known)	19-20916
3.125	<b>Nonpriority creditor's name and mailing address</b> <b>USDA Food Sfty&amp;Inspc. Services</b> <b>US Bank- FSIS Lockbox</b> <b>PO Box 979001</b> <b>Saint Louis, MO 63197</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$14,361.33</b>
3.126	<b>Nonpriority creditor's name and mailing address</b> <b>Veritiv Operating Company</b> <b>P.O. Box 409884</b> <b>Atlanta, GA 30384</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,045.55</b>
3.127	<b>Nonpriority creditor's name and mailing address</b> <b>VideoJet Technologies</b> <b>12113 Collection Center Dr</b> <b>Federal ID# 36-2822116</b> <b>Chicago, IL 60693</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$971.88</b>
3.128	<b>Nonpriority creditor's name and mailing address</b> <b>Waste Pro</b> <b>1405 Danielsville Rd</b> <b>Athens, GA 30601</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,955.35</b>
3.129	<b>Nonpriority creditor's name and mailing address</b> <b>Weldon Provisions LLC</b> <b>2943 W Encelia Ct</b> <b>Tucson, AZ 85745</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$622.08</b>
3.130	<b>Nonpriority creditor's name and mailing address</b> <b>Wells Fargo Bank, N.A.</b> <b>Attn: C. Allen Parker, CEO</b> <b>101 N. Phillips Avenue</b> <b>Sioux Falls, SD 57104</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.131	<b>Nonpriority creditor's name and mailing address</b> <b>Whitehall Specialties</b> <b>P.O. Box 74716</b> <b>Chicago, IL 60694</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$11,155.38</b>

Debtor	<b>Signature Pack, LLC</b> Name	Case number (if known)	<b>19-20916</b>
--------	------------------------------------	------------------------	-----------------

---

3.132	<b>Nonpriority creditor's name and mailing address</b> <b>Wilheit Packaging LLC</b> <b>PO Box 111</b> <b>Gainesville, GA 30503</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$106,513.26</b>
-------	---	---	---------------------

---

3.133	<b>Nonpriority creditor's name and mailing address</b> <b>William T. Porter</b> <b>1160 River Run</b> <b>Bishop, GA 30621</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$768.00</b>
-------	--	---	-----------------

---

3.134	<b>Nonpriority creditor's name and mailing address</b> <b>Williams Country Sausage</b> <b>5132 Old Troy-Hickman Road</b> <b>Union City, TN 38261</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$31,617.52</b>
-------	---	---	--------------------

---

3.135	<b>Nonpriority creditor's name and mailing address</b> <b>Winkler-IHM</b> <b>P O Box 68</b> <b>Dale, IN 47523</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <b>For notice only</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
-------	--	---	---------------

---

3.136	<b>Nonpriority creditor's name and mailing address</b> <b>Yamato Corporation Dataweigh</b> <b>PO Box 206185</b> <b>Dallas, TX 75320</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,737.59</b>
-------	--	---	-------------------

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2  
Lines 5a + 5b = 5c.

Total of claim amounts

5a. \$ 0.00

5b. + \$ 4,047,068.50

5c. \$ 4,047,068.50

## Fill in this information to identify the case:

Debtor name **Signature Pack, LLC**United States Bankruptcy Court for the: **NORTHERN DISTRICT OF GEORGIA**Case number (if known) **19-20916**☐ Check if this is an amended filing

## Official Form 206G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

## 1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal*

Property

(Official Form 206A/B).

## 2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Lease of freezer warehouse space, dock space, and office space**State the term remaining **44 months**

List the contract number of any government contract \_\_\_\_\_

**Americold  
25586 Network Place  
Chicago, IL 60673**2.2. State what the contract or lease is for and the nature of the debtor's interest **Lease of Liquid Nitrogen Tank and Spiral Freezer**State the term remaining **April, 2020**

List the contract number of any government contract \_\_\_\_\_

**Linde LLC  
88718 Expedite Way  
Chicago, IL 60695**2.3. State what the contract or lease is for and the nature of the debtor's interest **Trademark Licensing Agreement for SIGNATURE SELECT, Reg. No. 4769138. 2. SIGNATURE SELECT, Reg. No. 4610646.. Debtor is Licensee under non-exclusive license for use in the US for 10 year term commencing Nov 16, 2018**

State the term remaining \_\_\_\_\_

List the contract number of any government contract \_\_\_\_\_

**S. E. Meats  
700 25th Ave. West  
Birmingham, AL 35204**

## Fill in this information to identify the case:

Debtor name **Signature Pack, LLC**United States Bankruptcy Court for the: **NORTHERN DISTRICT OF GEORGIA**Case number (if known) **19-20916**☐ Check if this is an amended filing**Official Form 206H  
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the code debtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 **Chuck McAtee****5876 Highway 129 North, Ste N  
Pendergrass, GA 30567****Renasant Bank**☒ D **2.1**  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_2.2 **Gourmet  
Culinary  
Solutions LLC****515 Commercial Drive  
Statham, GA 30666****Renasant Bank**☒ D **2.1**  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_2.3 **Signature Food  
Marketing, LLC****5786 Hwy 129 North  
Suite N  
Pendergrass, GA 30567****Renasant Bank**☒ D **2.1**  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_2.4 **Tom Southworth****5876 Highway 129 North, Ste N  
Pendergrass, GA 30567****Renasant Bank**☒ D **2.1**  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_

**Fill in this information to identify the case:**Debtor name Signature Pack, LLCUnited States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIACase number (if known) 19-20916☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****Sources of revenue**  
Check all that apply**Gross revenue**  
(before deductions and exclusions)**From the beginning of the fiscal year to filing date:**  
From **1/01/2019** to **Filing Date**☒ Operating a business  
☐ Other \_\_\_\_\_\$5,953,454.59**For prior year:**  
From **1/01/2018** to **12/31/2018**☒ Operating a business  
☐ Other \_\_\_\_\_\$37,382,631.38**For year before that:**  
From **1/01/2017** to **12/31/2017**☒ Operating a business  
☐ Other \_\_\_\_\_\$55,679,589.22**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None.**Description of sources of revenue****Gross revenue from each source**  
(before deductions and exclusions)**From the beginning of the fiscal year to filing date:**  
From **1/01/2019** to **Filing Date**Sale of Fixed Assets\$1,950.00**For prior year:**  
From **1/01/2018** to **12/31/2018**Sale of Fixed Assets\$24,121.70**For prior year:**  
From **1/01/2018** to **12/31/2018**Class Action Settlement\$132.67

Debtor **Signature Pack, LLC**Case number (if known) **19-20916****Description of sources of revenue****Gross revenue from each source**  
(before deductions and exclusions)For prior year:  
From **1/01/2018** to **12/31/2018****Missed Appointment Fee****\$200.00****Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

<b>Creditor's Name and Address</b>	<b>Dates</b>	<b>Total amount of value</b>	<b>Reasons for payment or transfer</b> <i>Check all that apply</i>
3.1. <b>S. E. Meats</b> <b>700 25th Ave. West</b> <b>Birmingham, AL 35204</b>	2/8/19, 2/11/19, 2/14/19, 2/15/19, 2/18/19, 2/20/19, 2/22/19, 3/1/19, 3/4/19, 3/8/19, 3/11/19, 3/14/19, 3/18/19, 3/25/19, 3/29/19, 4/1/19, 4/8/19, 4/15/19, 4/23/19, 4/29/19, 5/6/19	<b>\$1,177,281.16</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <b><u>SE Meats Invoices Paid to Debtor and then turned over to SE Meats</u></b>
3.2. <b>Amer. Express Corporate Card</b> <b>PO Box 1270</b> <b>Newark, NJ 07101</b>	3/1/19, 3/25/19	<b>\$497,525.69</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <b><u>Credit Card</u></b>
3.3. <b>Kudzu Valley Farm</b> <b>PO Box 922</b> <b>Oakwood, GA 30566</b>	2/8/19, 2/22/19, 3/4/19, 3/14/19, 3/18/19, 3/26/19, 4/1/19, 4/8/19, 4/15/19	<b>\$266,703.40</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ____

Debtor **Signature Pack, LLC**Case number (if known) **19-20916**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.4. <b>Renasant Bank</b> <b>3333 Peachtree Road</b> <b>Suite M-10</b> <b>Atlanta, GA 30326</b>	2/15/19, 3/4/19, 3/5/19, 3/6/19, 3/15/19, 3/25/19, 3/27/19, 3/28/19, 4/4/19, 4/8/19, 4/10/19, 4/16/19, 4/23/19, 4/30/19, 5/3/19, 5/6/19, 5/9/19,	<b>\$218,041.47</b>	<input checked="" type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.5. <b>Ambassador Sanitation Mngmnt</b> <b>PO Box 2057</b> <b>Thomasville, GA 31799</b>	2/11/19, 2/14/19, 3/4/19, 3/14/19, 3/18/19, 4/1/19, 4/8/19, 4/15/19, 4/29/19	<b>\$170,085.06</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other___
3.6. <b>Pilgrim's Pride Corporation</b> <b>P.O. Box 809225</b> <b>Chicago, IL 60680</b>	2/11/19, 1/19/19, 3/4/19, 4/10/19	<b>\$134,357.58</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.7. <b>Perdue Farms, Inc.</b> <b>31149 Old Ocean City Rd</b> <b>Salisbury, MD 21804</b>	2/11/19, 2/19/19, 3/4/19, 3/18/19	<b>\$129,638.40</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.8. <b>Bankcard Center</b> <b>P.O. Box 71205</b> <b>Charlotte, NC 28272</b>	2/11/19, 3/4/19, 3/18/19, 5/3/19	<b>\$99,415.60</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u><b>Credit Card</b></u>
3.9. <b>Harrison Poultry</b> <b>1201 Waukegan Rd.</b> <b>Glenview, IL 60025</b>	2/11/19, 2/19/19, 3/4/19, 3/18/19	<b>\$95,048.00</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___

Debtor **Signature Pack, LLC**Case number (if known) **19-20916**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.10 Humana Health Plan Inc. P O BOX 3225 Milwaukee, WI 53201	2/11/19, 3/4/19, 4/15/19	\$84,904.43	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Employee Health Insurance</u>
3.11 Ameriprise Financial 901 3rd Avenue S Minneapolis, MN 55402	2/25/19, 3/18/19, 4/23/19	\$73,099.41	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Credit Card</u>
3.12 Americold 25586 Network Place Chicago, IL 60673	3/18/19	\$58,401.11	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Landlord</u>
3.13 Reliable Transport. Solutions PO Box 507 Amelia, OH 45102	2/13/19, 3/4/19, 4/1/19, 4/8/19, 4/15/19	\$51,963.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other___
3.14 Monogram Food Solutions, LLS P.O. Box 71400 Chicago, IL 60694	2/22/19	\$42,451.20	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.15 Tasty Breads International 9445 Fullerton Avenue Franklin Park, IL 60131	2/22/19	\$37,082.40	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.16 Stone Mountain Industrial Park Inc	2/11/19, 3/4/19, 4/1/19, 4/26/19	\$34,077.75	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Lease payments</u>
3.17 USA Logistics, Inc P.O. Box 2977 Chesterton, IN 46304	2/14/19, 2/21/19	\$33,764.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other___

Debtor **Signature Pack, LLC**Case number (if known) **19-20916**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.18 Georgia Power Company 96 Annex Atlanta, GA 30396	2/11/19, 3/4/19, 3/14/19, 3/18/19, 4/8/19, 4/29/19	\$32,324.93	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Utilities</u>
3.19 Wilheit Packaging LLC PO Box 111 Gainesville, GA 30503	2/22/19, 3/4/19	\$28,030.97	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ____
3.20 Amtrust North American 59 Maiden Lane New York, NY 10038	2/10/19, 3/10/19, 4/10/19	\$27,279.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Insurance</u>
3.21 TQL 4289 Ivy Pointe Blvd Cincinnati, OH 45245	2/14/19	\$24,936.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other ____
3.22 Shane Derek Lee	2/11/19, 3/4/19, 3/18/19, 4/15/19, 5/7/19	\$23,697.74	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other ____
3.23 Southern Food Broker 196 Bruce Etheredge Parkway Pell City, AL 35128	3/12/19	\$18,324.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other ____
3.24 John R White Company, Inc. 200 Citation Court Suite 100 Birmingham, AL 35209	2/11/19	\$17,229.71	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ____
3.25 Genesis Baking Company 211 Woodlawn Avenue Norwalk, OH 44857	2/22/19	\$16,723.20	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ____

Debtor **Signature Pack, LLC**Case number (if known) **19-20916**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.26 <b>Murray Brokerage</b> 684 Woodlands Drive Suite 300 Maumee, OH 43537	3/18/19	\$16,375.21	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other___
3.27 <b>Connect Logistics</b> 3292 Thompson Bridge RD #350 Gainesville, GA 30506	2/14/19	\$15,458.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other___
3.28 <b>USDA Food Sfty&amp;Inspc. Services</b> US Bank- FSIS Lockbox PO Box 979001 Saint Louis, MO 63197	3/4/19, 4/1/19	\$14,117.28	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u><b>USDA Inspection</b></u>
3.29 <b>McLain Foods</b> 100 2nd Avenue South Suite 202-S Saint Petersburg, FL 33701	3/12/19	\$13,371.19	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.30 <b>ConAgra Foods</b> 222 W. Merchandise Mart Plaza Suite 1300 Chicago, IL 60654	3/4/19	\$13,009.50	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.31 <b>H &amp; D Pallet</b> 464 Garrison Shoals Rd Lula, GA 30554	2/11/19, 3/4/19, 4/1/19, 4/29/19	\$11,082.50	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.32 <b>Whitehall Specialties</b> P.O. Box 74716 Chicago, IL 60694	3/4/19	\$11,000.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.33 <b>ETCON Employment Solutions</b> 439 E E Butler Parkway Gainesville, GA 30501	2/11/19, 3/4/19, 3/18/19, 4/15/19, 4/25/19	\$10,769.11	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other___

Debtor **Signature Pack, LLC**Case number (if known) **19-20916**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.34 City of Statham PO Box 28 27 Jefferson Street Statham, GA 30666	2/14/19, 3/4/19, 4/8/19, 5/8/19	\$10,090.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Utilities</u>
3.35 Liberty Mutual 175 Berkeley Street Boston, MA 02116	2/22/19, 3/22/19, 4/22/19	\$9,163.20	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Insurance</u>
3.36 Amanda Jayne Sinnamon	3/4/19, 3/18/19, 4/15/19	\$9,093.75	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other ____
3.37 Planned Administrators P.O Box 6927 Columbia, SC 29260	2/11/19, 3/4/19, 4/1/19	\$8,378.56	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Employee Insurance</u>
3.38 Willie C. Lee Jr. 332 Stillwater Lane Jefferson, GA 30549	4/8/19, 4/15/19, 5/7/19	\$8,000.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other ____
3.39 Hof Haus 2386 S. Blue Island Avenue Chicago, IL 60608	3/4/19	\$7,875.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ____
3.40 Johnson O'Hare Company, Inc. One Progress Road Billerica, MA 01821	3/4/19	\$7,740.90	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other ____
3.41 Arthur-Bertel & Assoc. Inc. 341 JUNGERMANN RD Saint Peters, MO 63376	4/11/19	\$7,291.58	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other ____

Debtor **Signature Pack, LLC**Case number (if known) **19-20916**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.42 <b>Dahlonga Packaging, Inc.</b> <b>P.O. Box 936696</b> <b>Atlanta, GA 31193</b>	<b>3/12/19</b>	<b>\$6,947.50</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other____

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. <b>Chuck McAtee</b> <b>5876 Highway 129 North, Ste N</b> <b>Pendergrass, GA 30567</b> <b>Manager</b>	<b>06/05/2018 -</b> <b>1,052.33;</b> <b>06/18/2018 -</b> <b>1,376.28;</b> <b>07/03/2018 -</b> <b>790.78;</b> <b>07/26/2018 -</b> <b>497.71;</b> <b>08/23/2018 -</b> <b>735.93;</b> <b>10/09/2018 -</b> <b>445.91;</b> <b>01/03/2019 -</b> <b>577.73;</b> <b>01/30/2019 -</b> <b>621.95;</b> <b>03/05/2019 -</b> <b>924.50;</b> <b>03/18/2019 -</b> <b>520.10;</b> <b>04/25/2019 -</b> <b>572.30</b>	<b>\$8,115.52</b>	<b>Travel and Expense Reimbursements</b>
4.2. <b>Gourmet Culinary Solutions LLC</b> <b>515 Commercial Drive</b> <b>Statham, GA 30666</b> <b>Affiliate</b>	<b>May 11, 2018</b> <b>- May 6, 2019</b>	<b>\$2,857,370.77</b>	<b>AP invoice/AR interest</b>
4.3. <b>North Georgia Logistics</b> <b>P O Box 208</b> <b>Pendergrass, GA 30567</b> <b>Affiliate</b>	<b>May 9, 2018 -</b> <b>May 9, 2019</b>	<b>\$335,714.38</b>	<b>Freight</b>

Debtor **Signature Pack, LLC**Case number (if known) **19-20916**

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.4. Tamale Factory, Inc. 2910 Creek Tree Ln Cumming, GA 30041 Member in Signature Food Marketing, LLC	05/15/2018 05/31/2018 06/15/2018 06/29/2018 07/15/2018 07/31/2018 08/15/2018 08/31/2018 09/15/2018 09/28/2018 10/15/2018 10/31/2018 11/15/2018	\$141,577.67	Consulting Fees (in the amount of \$10,890.50 each)
4.5. Tamale Factory, Inc. 2910 Creek Tree Ln Cumming, GA 30041 Member in Signature Food Marketing, LLC	12/03/2018 12/14/2018 12/31/2018 01/14/2019 01/31/2019 02/14/2019 02/28/2019 03/14/2019 03/31/2019 04/15/2019 04/30/2019	\$125,891.04	Redemption of interest in Debtor's parent (in the amount of \$11,444.64 each)

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
-----------------------------	--------------------------	------	-------------------

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	---	-----------------------	--------

**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. JSO Associates, Inc. v. Signature Pack, LLC, Signature Food Marketing, LLC, Thomas R. Southworth, and Charles E. McAtee 19CV1781	Civil	US District Court, E.D.N.Y.	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Signature Pack, LLC**Case number (if known) **19-20916**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.2.	<b>Versacold USA Inc. v. Signature Pack, LLC MV-19-0628</b>	<b>Dispossessory</b>	<b>Magistrate Court of Jackson County, GA</b>	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.3.	<b>Family Dollar Services, LLC v Signature Pack, LLC, Signature Food Marketing, LLC and Charles McAtee cv-590-rjc-dsc</b>	<b>Civil</b>	<b>US District Court, W.D.N.C.</b>	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.4.	<b>D&amp;H Marketing Group, Inc. v. Signature Food Marketing, LLC et al 2018-CV-00141</b>	<b>Civil</b>	<b>US District Court, E.D.N.C.</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None
**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**
☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
------------------------------	---	-------------	-------

**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**
☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</p>		

**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Debtor **Signature Pack, LLC**Case number (if known) **19-20916**

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	<b>Jones &amp; Walden, LLC 21 Eighth Street, NE Atlanta, GA 30309</b>		<b>5/8/19</b>	<b>\$30,000.00</b>

Email or website address

Who made the payment, if not debtor?

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
-------------------------	-----------------------------------	---------------------------	-----------------------

**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

	Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1	<b>S. E. Meats 700 25th Ave. West Birmingham, AL 35204</b>	<b>Inventory in conjunction with Signature Food Marketing, LLC sale of IP and associated rights related to Signature Pick 5 and Signature Select</b>	<b>November 16, 2018</b>	<b>\$513,300.05</b>

Relationship to debtor  
**None**

13.2	<b>Signature Foods Marketing, LLC 5786 Hwy 129 North Suite N Pendergrass, GA 30567</b>	<b>Inventory sale net proceeds from S.E. Meats deposited into Signature Marketing Account and an escrow hold back account after sale; however, any portion of such funds that were Debtor's were returned by Signature Marketing pursuant to its payment of Debtor's vendors and expenses and direct return of monies to Debtor well in excess of any such funds that were of Debtor.</b>	<b>November 16, 2018</b>	<b>\$203,996.80</b>
------	--	---	--------------------------	---------------------

Relationship to debtor  
**100% Member**

13.3	<b>SPI Equipment LLC</b>	<b>Sale of Fixed Assets/ Hassen Bagger</b>	<b>9/20/2018</b>	<b>\$24,121.70</b>
------	--------------------------	--	------------------	--------------------

Relationship to debtor  
**None**

Debtor **Signature Pack, LLC**Case number (if known) **19-20916**

	Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.4	<b>WOHL ASSOCIATES, INC</b>	<b>Sale of Fixed Assets/ Waukesha Pump</b>	<b>1/24/19</b>	<b>\$1,350.00</b>
	Relationship to debtor <b>None</b>			
13.5	<b>Absolute Lift Parts Corporation</b>	<b>Sale of Fixed Assets/ Yale ERC040/HYSTER E502 Lift</b>	<b>4/23/2019</b>	<b>\$600.00</b>
	Relationship to debtor <b>None</b>			

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy From-To
---------	-------------------------------

**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	---	---

**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☐ No. Go to Part 10.
- ☒ Yes. Does the debtor serve as plan administrator?
- ☒ No Go to Part 10.
- ☐ Yes. Fill in below:

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**

Debtor **Signature Pack, LLC**Case number (if known) **19-20916****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
--	---------------------------------	-------------------------------	--	---

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
---	--	-----------------------------	-----------------------

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
---------------------------	-----------------------------------	-----------------------------	-----------------------

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Owner's name and address	Location of the property	Describe the property	Value
Gourmet Culinary Solutions, LLC 515 Commercial Drive Statham, GA 30666	86 Jackson Concourse Pendergrass, GA 30567	Raw materials, packaging, and finished goods	\$214,119.88
Owner's name and address	Location of the property	Describe the property	Value
Gourmet Culinary Solutions, LLC 515 Commercial Drive Statham, GA 30666	5876 Highway 129 North, Ste N Pendergrass, GA 30567	Raw materials, packaging, and finished goods	\$135,901.52
Owner's name and address	Location of the property	Describe the property	Value
AIR/Eastern PO Box 2995 Ponte Vedra Beach, FL 32004	86 Jackson Concourse Pendergrass, GA 30567	Inventory owned by customer	Unknown
Owner's name and address	Location of the property	Describe the property	Value
FoodSourceOne 1663 W. Riverfork Dr. Nixa, MO 65714	86 Jackson Concourse Pendergrass, GA 30567	Inventory owned by customer	Unknown

Debtor **Signature Pack, LLC**Case number (if known) **19-20916**

Owner's name and address	Location of the property	Describe the property	Value
Jafco 890 East Street 2nd Floor Tewksbury, MA 01876	86 Jackson Concourse Pendergrass, GA 30567	Inventory owned by customer	Unknown
Owner's name and address	Location of the property	Describe the property	Value
McLain 100 2nd Ave. S. Suite 2025 Saint Petersburg, FL 33701	86 Jackson Concourse Pendergrass, GA 30567	Inventory owned by customer	Unknown
Owner's name and address	Location of the property	Describe the property	Value
OneSource 951 Peek Street Conyers, GA 30012	86 Jackson Concourse Pendergrass, GA 30567	Inventory owned by customer	Unknown
Owner's name and address	Location of the property	Describe the property	Value
Prime Foods PO Box 348 Roslyn, NY 11576	86 Jackson Concourse Pendergrass, GA 30567	Inventory owned by customer	Unknown
Owner's name and address	Location of the property	Describe the property	Value
Rich Chicks 13771 S. Gramercy Place Gardena, CA 90249	86 Jackson Concourse Pendergrass, GA 30567	Inventory owned by customer	Unknown
Owner's name and address	Location of the property	Describe the property	Value
Seafood Sales 9957 Moorings Dr., Suite 104 Jacksonville, FL 32257	86 Jackson Concourse Pendergrass, GA 30567	Inventory owned by customer	Unknown
Owner's name and address	Location of the property	Describe the property	Value
Semper Foods/Lion Dist. 7000 W. Palmetto Park Rd, Suite 210 Boca Raton, FL 33433	86 Jackson Concourse Pendergrass, GA 30567	Inventory owned by customer	Unknown
Owner's name and address	Location of the property	Describe the property	Value
Southern Food Broker 196 Bruce Etheredge Parkway Pell City, AL 35128	86 Jackson Concourse Pendergrass, GA 30567	Inventory owned by customer	Unknown
Owner's name and address	Location of the property	Describe the property	Value
Reds All Natural 131 Third Ave. N. Suite 101 Franklin, TN 37064	86 Jackson Concourse Pendergrass, GA 30567	Inventory owned by customer	Unknown
Owner's name and address	Location of the property	Describe the property	Value
Synergy 1239 Mulberry Court Murfreesboro, TN 37130	86 Jackson Concourse Pendergrass, GA 30567	Inventory owned by customer	Unknown
Owner's name and address	Location of the property	Describe the property	Value
Coach Joe 1660 Historic Hwy 441 Clarkesville, GA 30523	86 Jackson Concourse Pendergrass, GA 30567	Inventory owned by customer	Unknown
Owner's name and address	Location of the property	Describe the property	Value
SE Meats 700 25th Avenue West Birmingham, AL 35204	86 Jackson Concourse Pendergrass, GA 30567	Inventory owned by customer	Unknown

**Part 12: Details About Environment Information**

Debtor **Signature Pack, LLC**Case number (if known) **19-20916**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

- ☒ No.  
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

**Part 13: Details About the Debtor's Business or Connections to Any Business**

**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.	Dates business existed
-----------------------	-------------------------------------	--	------------------------

**26. Books, records, and financial statements**

**26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.**

- ☐ None

Name and address	Date of service From-To
26a.1. <b>Roe CPA, PC 3460 Summit Ridge Pkwy Ste 303 Duluth, GA 30096</b>	<b>approximately 3 years</b>

**26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.**

- ☒ None

Debtor **Signature Pack, LLC**Case number (if known) **19-20916**

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address

If any books of account and records are unavailable, explain why

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address

26d.1. **Renasant Bank**  
**3333 Peachtree Road**  
**Suite M-10**  
**Atlanta, GA 30326**

## 27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☐ No

☒ Yes. Give the details about the two most recent inventories.

	Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
27.1	<b>Jerry Collins</b>	<b>4/30/2019</b>	<b>\$565,969.67 / average cost</b>
	Name and address of the person who has possession of inventory records <b>Jerry Collins</b>		

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
<b>Tom Southworth</b>	<b>5876 Highway 129 North, Ste N Pendergrass, GA 30567</b>	<b>President/Manager</b>	
<b>Chuck McAtee</b>	<b>5876 Highway 129 North, Ste N Pendergrass, GA 30567</b>	<b>CEO/Manager</b>	
<b>Signature Food Marketing, LLC</b>	<b>5786 Hwy 129 North, Ste N Pendergrass, GA 30567</b>	<b>Member</b>	<b>100</b>

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No

☐ Yes. Identify below.

## 30. Payments, distributions, or withdrawals credited or given to insiders

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

page 16

Debtor **Signature Pack, LLC**Case number (if known) **19-20916**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No  
☒ Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	<b>Chuck McAtee</b> 5876 Highway 129 North, Ste N Pendergrass, GA 30567	\$230,118.08	May 11, 2018 - May 8, 2019	Salary
	Relationship to debtor Manager			
30.2	<b>Tom Southworth</b> 5876 Highway 129 North, Ste N Pendergrass, GA 30567	\$93,682.72	May 11, 2018 - May 8, 2019	Salary
	Relationship to debtor Manager			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☐ No  
☒ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
Signature Food Marketing, LLC	EIN: XX-XXX6521

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No  
☐ Yes. Identify below.

Name of the pension fund	Employer Identification number of the parent corporation
--------------------------	--

#### Part 14: Signature and Declaration

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.  
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **May 31, 2019**

**/s/ Chuck McAtee**  
Signature of individual signing on behalf of the debtor

**Chuck McAtee**  
Printed name

Position or relationship to debtor **Manager**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No  
☐ Yes

**United States Bankruptcy Court  
Northern District of Georgia**

In re **Signature Pack, LLC**

Debtor(s)

Case No. **19-20916**

Chapter **11**

**LIST OF EQUITY SECURITY HOLDERS**

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
<b>Signature Food Marketing, LLC</b> <b>5786 Hwy 129 North</b> <b>Suite N</b> <b>Pendergrass, GA 30567</b>		<b>100%</b>	

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the **Manager** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **May 31, 2019**

Signature **/s/ Chuck McAtee**  
**Chuck McAtee**

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.*